21156Y Attorney Docket Number **DECLARATION AND** POWER OF ATTORNEY Catherine Abbadic, et al. First Named Inventor FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e)) Filing Date Declaration Submitted \boxtimes OR with Initial Group Art Unit Filing required) Examiner Name

As a below named inventor,	I hereby declare th	at:										
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural												
I believe I am the original, fir names are listed below) of the	e subject matter whic	h is clain	ned and for which a patent is	sought on the invention	invente entitled	or (if plu d: 	ıral					
	CCR-2 ANTAGON	ISTS F	OR TREATMENT OF NE	UROPATHIC PAIN								
		(1	Title of the Invention)									
the specification of which		6.1. 7					:					
bears the Attorney Docl	ket Number and Title	of the In	ivention notco above									
OR is attached hereto												
OR				tion Number or PCT Inte	mation	nal						
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Application Number I hereby state that I have revi	and	was ame	ended on (MM/DD/YYYY)		, ,,	,	Ť					
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I acknowledge the duty to di	sclose to the Patent a	nd Trade	mark Office all information	known to me to be materi	ial to p	atentabi	lity					
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I hereby claim foreign priorit certificate(s), or 365(a) of any	, PCT international a	nnlicatio	n which designated at least 0	ne country other man the	Onne	n States	Of .					
America listed below and has	ve also identified beli	ow, by cl	necking the box, any foreign	application for patent or	ιπνεπισ	or's certi	ficate(s),					
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Prior Foreign Application Number(s)	Country		Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Num	iber	YES	NO					
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I hereby claim the benefit under	35 U.S.C. 119(e) of an	y United S		isted below.								
Application Num	nber(s)		Filing Date (MM/DD/YYYY)	Attorney Do	cket N	iumber						
60/476,391		06/06/2	003	21156PV								
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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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	nventor, I hereby appoint istered practitioner(s) to crewith:	t, respectively an prosecute this approximationers Asse	nd individ optication ociated wi	ually, as me and to tra	ny attorney nsact all bu stomer Nur	(s) or agent siness in the		ed States F				
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Name	David Rubin							<u></u>		<u> </u>		
Address	Merck & Co., Inc	Patent Depart	ment			<u>. </u>						
Address	P.O. Box 2000, R	¥60-30				Γ			07	0.66 0007		
City	Rahway		-		State	NJ		ZIP	-	065-0907		
Country	USA				32)594-2 			Fax		32)594-472		
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DECLARATION AND POWER OF ATTORNEY ADDITIONAL INVENTOR(S) Supplemental Sheet

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		it Inventor, if any:			<u> </u>	A petition has been filed for this unsigned inventor Family Name or Surname									
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Inventor's Signature					·-··			Date			_				
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Name of Additio	nat Jo	int Inventor, if any:				A pe	tition				s unsigne		ventor		
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l	Filing	ng		required)	Examiner Name	
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As a below named inventor,	I hereby declare th	at:										
My residence, mailing address			below next to my name.									
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amended by any amendment	specifically reterred	to above.										
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between as defined in 37 CFR 1.56, including for continuation-in-part application.												
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Approved for use through 07/31/2006. OMB 0651-0032 SUBSTITUTE for PTO/SB/01 (08-03), DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

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DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

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		int Inventor, if any:	A petition has been filed for this unsigned inventor											
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